

UNITED STATES DISTRICT COURT
WESTERN DISTRICT OF WASHINGTON
AT TACOMA

BREON M.,

Plaintiff,

v.

COMMISSIONER OF SOCIAL
SECURITY,

Defendant.

CASE NO. C19-5942 BHS

ORDER AFFIRMING DENIAL OF
BENEFITS

I. BASIC DATA

Type of Benefits Sought:

(X) Disability Insurance

(X) Supplemental Security Income

Plaintiff's:

Sex: Male

Age: 44 at the time of amended alleged disability onset.

Principal Disabilities Alleged by Plaintiff: Right foot problems, anxiety, depression, sleep disturbance, concentration deficit. *See* Admin. Record (Dkt. # 10) ("AR") at 134–35.

Disability Allegedly Began: June 5, 2012

Principal Previous Work Experience: Tractor operator, supervisor.

Education Level Achieved by Plaintiff: High school diploma.

II. PROCEDURAL HISTORY—ADMINISTRATIVE

Before Administrative Law Judge (“ALJ”) Marilyn Mauer:

Date of Hearing: January 26, 2018, and June 20, 2018¹

Date of Decision: September 5, 2018

Appears in Record at: AR at 36–52

Summary of Decision:

The claimant met the insured status requirements of the Social Security Act through December 31, 2016.

The claimant has not engaged in substantial gainful activity since the amended alleged onset date. *See* 20 C.F.R. §§ 404.1571–76, 416.971–76.

The claimant has the following severe impairments: right tarsal tunnel syndrome, osteoarthritis of the left knee and ankle, anxiety, and depression. *See* 20 C.F.R. §§ 404.1520(c), 416.920(c).

The claimant does not have an impairment or combination of impairments that meets or medically equals the severity of one of the listed impairments in 20 C.F.R. Part 404, Subpart P, Appendix 1. *See* 20 C.F.R. §§ 404.1520(d), 404.1525, 404.1526, 416.920(d), 416.925, 416.926.

The claimant has the residual functional capacity (“RFC”) to perform sedentary work as defined in 20 C.F.R. §§ 404.1567(a) and 416.967(a), with exceptions. He can lift 10 pounds occasionally and less than 10 pounds frequently. He can stand and/or walk for 20 minutes at a time up to two hours total in an eight-hour work day. He can sit for at least six hours in an eight-hour work day. He requires the use of a cane in the non-dominant left hand when walking and standing. He can never climb ladders, ropes, or scaffolds. He can occasionally climb ramps and stairs. He can occasionally stoop. He can never crouch, crawl, or kneel. He can frequently reach overhead. He can frequently handle, finger, and feel objects. He can have occasional exposure to hazards such as unprotected heights and large moving equipment. He can have superficial public

¹ A hearing was initially held on October 4, 2017, but Plaintiff was unrepresented and was granted a continuance to seek counsel. *See* AR at 70–81.

1 contact. He can understand, remember, and apply information consistent
2 with tasks that have a GED reasoning level of three or less.

3 The claimant is unable to perform any past relevant work. *See* 20
4 C.F.R. §§ 404.1565, 416.965.

5 The claimant was a younger individual (age 18–49) on the amended
6 alleged disability onset date. On XXXX, 2017,² he changed age category
7 to an individual closely approaching advanced age. *See* 20 C.F.R. §§
8 404.1563, 416.963.

9 The claimant has at least a high school education is able to
10 communicate in English. *See* 20 C.F.R. §§ 404.1564, 416.964.

11 Prior to XXXX, 2017, transferability of job skills is not material to
12 the determination of disability because using the Medical-Vocational Rules
13 as a framework supports a finding that the claimant is “not disabled,”
14 whether or not the claimant has transferable job skills. *See* Social Security
15 Ruling 82–41; 20 C.F.R. Part 404, Subpart P, App’x 2.

16 Prior to XXXX, 2017, the date the claimant’s age category changed,
17 considering the claimant’s age, education, work experience, and RFC, there
18 were jobs that existed in significant numbers in the national economy that
19 the claimant could perform. *See* 20 C.F.R. §§ 404.1569, 404.1569(a),
20 416.969, 416.969(a).

21 Beginning on XXXX, 2017, the date the claimant’s age category
22 changed, considering the claimant’s age, education, work experience, and
RFC, there are no jobs that exist in significant numbers in the national
economy that the claimant could perform. *See* 20 C.F.R. §§ 404.1560(c),
404.1566, 416.960(c), 416.966.

The claimant was not disabled prior to XXXX, 2017, but became
disabled on that date, and has continued to be disabled through the date of
the ALJ’s decision. *See* 20 C.F.R. §§ 404.1520(g), 416.920(g).

The claimant was not under a disability within the meaning of the
Social Security Act at any time through December 31, 2016, the date last
insured. *See* 20 C.F.R. §§ 404.315, 404.320.

² Because Plaintiff’s birthdate is easily discernable from this date, it is redacted. *See* Fed.
R. Civ. P. 5.2(a)(2); LCR 5.2(a)(1).

1 Before Appeals Council:

2 Date of Decision: August 7, 2019

3 Appears in Record at: AR at 1–3

4 Summary of Decision: Denied review.

5 **III. PROCEDURAL HISTORY—THIS COURT**

6 Jurisdiction based upon: 42 U.S.C. § 405(g)

7 Brief on Merits Submitted by (X) Plaintiff (X) Commissioner

8 **IV. STANDARD OF REVIEW**

9 Pursuant to 42 U.S.C. § 405(g), the Court may set aside the Commissioner's
10 denial of Social Security benefits when the ALJ's findings are based on legal error or not
11 supported by substantial evidence in the record as a whole. *Bayliss v. Barnhart*, 427 F.3d
12 1211, 1214 n.1 (9th Cir. 2005). "Substantial evidence" is more than a scintilla, less than
13 a preponderance, and is such relevant evidence as a reasonable mind might accept as
14 adequate to support a conclusion. *Richardson v. Perales*, 402 U.S. 389, 401 (1971);
15 *Magallanes v. Bowen*, 881 F.2d 747, 750 (9th Cir. 1989). The ALJ is responsible for
16 determining credibility, resolving conflicts in medical testimony, and resolving any other
17 ambiguities that might exist. *Andrews v. Shalala*, 53 F.3d 1035, 1039 (9th Cir. 1995).
18 While the Court is required to examine the record as a whole, it may neither reweigh the
19 evidence nor substitute its judgment for that of the ALJ. *See Thomas v. Barnhart*, 278
20 F.3d 947, 954 (9th Cir. 2002). "Where the evidence is susceptible to more than one
21 rational interpretation, one of which supports the ALJ's decision, the ALJ's conclusion
22 must be upheld." *Id.*

V. EVALUATING DISABILITY

Plaintiff bears the burden of proving he is disabled within the meaning of the Social Security Act (“Act”). *Meanel v. Apfel*, 172 F.3d 1111, 1113 (9th Cir. 1999). The Act defines disability as the “inability to engage in any substantial gainful activity” due to a physical or mental impairment which has lasted, or is expected to last, for a continuous period of not less than twelve months. 42 U.S.C. §§ 423(d)(1)(A), 1382c(3)(A). A claimant is disabled under the Act only if his impairments are of such severity that he is unable to do his previous work, and cannot, considering his age, education, and work experience, engage in any other substantial gainful activity existing in the national economy. 42 U.S.C. §§ 423(d)(2)(A), 1382c(3)(B); *see also Tackett v. Apfel*, 180 F.3d 1094, 1098–99 (9th Cir. 1999).

The Commissioner has established a five-step sequential evaluation process for determining whether a claimant is disabled within the meaning of the Act. *See* 20 C.F.R. §§ 404.1520, 416.920. The claimant bears the burden of proof during steps one through four. *Valentine v. Comm’r of Soc. Sec. Admin.*, 574 F.3d 685, 689 (9th Cir. 2009). At step five, the burden shifts to the Commissioner. *Id.*

VI. ISSUES ON APPEAL

- A. Whether the ALJ erred in discounting Plaintiff’s symptom testimony.
- B. Whether the ALJ erred in evaluating the opinions of Robert Thompson, M.D.
- C. Whether the ALJ erred in rejecting the opinions of Michael Frazier, D.P.M.
- D. Whether the ALJ erred in assessing Plaintiff’s RFC, and basing his step

1 five findings on that RFC.

2 VII. DISCUSSION

3 A. The ALJ Did Not Harmfully Err in Discounting Plaintiff's Symptom 4 Testimony

5 Plaintiff argues the ALJ erred in discounting his subjective symptom testimony.
6 Pl. Op. Br. (Dkt. # 12) at 2–5. Plaintiff focuses on his physical symptom testimony, so
7 the Court will do the same. *See id.*

8 Plaintiff testified he could not work because of ongoing pain in his right foot and
9 back. *See* AR at 88, 331. He testified he uses a cane. AR at 92, 337. He testified he
10 could lift five pounds off and on for up to two hours. AR at 95. He testified he could
11 stand in one place for 15–20 minutes, and walk without interruption for 20–30 minutes.
12 *Id.* He testified he elevated his feet at least twice a day for upwards of thirty minutes at a
13 time. AR at 98–99.

14 The Ninth Circuit has “established a two-step analysis for determining the extent
15 to which a claimant’s symptom testimony must be credited.” *Trevizo v. Berryhill*, 871
16 F.3d 664, 678 (9th Cir. 2017). The ALJ must first determine whether the claimant has
17 presented objective medical evidence of an impairment that “‘could reasonably be
18 expected to produce the pain or other symptoms alleged.’” *Id.* (quoting *Garrison v.*
19 *Colvin*, 759 F.3d 995, 1014–15 (9th Cir. 2014)). At this stage, the claimant need only
20 show the impairment could have caused some degree of the symptoms; he does not have
21 to show the impairment could reasonably be expected to cause the severity of the
22 symptoms alleged. *Id.* The ALJ found Plaintiff met this step because his medically

1 determinable impairments could reasonably be expected to cause the symptoms he
2 alleged. AR at 42.

3 If the claimant satisfies the first step, and there is no evidence of malingering, the
4 ALJ may only reject the claimant's testimony "by offering specific, clear and convincing
5 reasons for doing so. This is not an easy requirement to meet." *Trevizo*, 871 F.3d at 678
6 (quoting *Garrison*, 759 F.3d at 1014–15). Affirmative evidence of malingering,
7 however, can alone support an ALJ's rejection of the plaintiff's testimony. *See Schow v.*
8 *Astrue*, 272 F. App'x 647, 651 (9th Cir. 2008) (noting the existence of "affirmative
9 evidence suggesting malingering vitiates the clear and convincing standard of review")
10 (internal quotation marks omitted).

11 The ALJ discounted Plaintiff's testimony regarding the severity of his physical
12 symptoms. *See* AR at 42–47. The ALJ determined Plaintiff's testimony was inconsistent
13 with the overall medical evidence, which showed largely mild findings and effective
14 symptom control through treatment and medication. *See* AR at 46. The ALJ also found
15 evidence that Plaintiff had exaggerated his symptoms and limitations. *See* AR at 47.

16 Plaintiff has failed to show the ALJ harmfully erred in rejecting his physical
17 symptom testimony. *See Ludwig v. Astrue*, 681 F.3d 1047, 1054 (9th Cir. 2012) (citing
18 *Shinseki v. Sanders*, 556 U.S. 396, 407–09 (2009)) (holding that the party challenging an
19 administrative decision bears the burden of proving harmful error). The ALJ noted
20 doctors found evidence of exaggeration at two separate evaluations. In April 2014,
21 Podiatrist Terry Felts, D.P.M., and orthopedist William Bulley, M.D., noted Plaintiff's
22 pain was out of proportion to their objective findings, Plaintiff showed a "pain/disability

conviction,” and “there [was] significant concern for [Plaintiff’s] amplified/exaggerated pain[,] which has also been noted by previous [independent medical examination] doctors.” AR at 555–56. In March 2016, John Coe, D.O., noted Plaintiff’s “[g]ait is quite obviously abnormal probably with some degree of conscious accentuation.” AR at 678. Plaintiff has not shown the ALJ unreasonably interpreted this evidence, and has thus failed to show she harmfully erred in discounting Plaintiff’s testimony based on symptom exaggeration.

The Court need not address the ALJ’s finding that Plaintiff’s testimony was inconsistent with the medical evidence because any error in that analysis was harmless. “[A]n error is harmless so long as there remains substantial evidence supporting the ALJ’s decision and the error ‘does not negate the validity of the ALJ’s ultimate conclusion.’” *Molina v. Astrue*, 674 F.3d 1104, 1115 (9th Cir. 2012) (quoting *Batson v. Comm’r of Soc. Sec. Admin.*, 359 F.3d 1190, 1197 (9th Cir. 2004)). The ALJ’s finding of exaggeration remains valid regardless of any error in finding, for example, that Plaintiff’s symptoms were not effectively controlled with treatment. Plaintiff has thus failed to show the ALJ harmfully erred in rejecting Plaintiff’s physical symptom testimony.

B. The ALJ Did Not Harmfully Err in Evaluating Dr. Thompson’s Opinions

Plaintiff argues the ALJ erred in evaluating Dr. Thompson’s opinions by failing to address all of his testimony. Pl. Op. Br. at 5–7. In particular, Plaintiff contends Dr. Thompson opined Plaintiff would need to elevate his leg for at least 15 minutes two to three times a day. *See id.*

1 Dr. Thompson testified as a medical expert at a supplemental hearing on June 20,
2 2018. *See* AR at 116–31. Dr. Thompson testified Plaintiff had exertional, manipulative,
3 postural, and environmental limitations. *See* AR at 120–26. Of primary importance to
4 Plaintiff’s argument, Dr. Thompson also had the following exchange with the ALJ
5 regarding whether Plaintiff needed to elevate his foot throughout the day:

6 Q [ALJ]. And Doctor, in the record, was there any evidence that
7 would support the Claimant’s need to elevate his foot while seated?

8 A. There was mild swelling noted a couple of places, and there
9 was no evidence of an inflammatory arthritis seen in the record.

10 Q. So is that a no?

11 A. Well, the issue there is that people who have obesity will get
12 one plus swelling, and it may or may not require elevation. I can’t say for
13 sure.

14 Q. Would it be necessary for the relief of pain?

15 A. Yes, probably.

16 Q. At what frequency would the elevation be necessary?

17 A. Oh boy. I would imagine that at least for a period of time like
18 15 minutes and probably maybe two, perhaps three in an entire [work] day.

19 ...

20 Q. Okay. So that would be equivalent to if there were standard
21 breaks every two hours for 15 minutes, that would be sufficient?

22 A. I think so. I did not see specific evidence of gross swelling or
pitting edema stated. If I missed it, I’d be happy to review that evidence.

AR at 126–27.

1 The ALJ gave Dr. Thompson's opinions great weight. AR at 49. The ALJ did not
2 explicitly address Dr. Thompson's testimony regarding whether Plaintiff needed to
3 elevate his leg during the day. *See id.*

4 Plaintiff has failed to show harmful error. *See Ludwig*, 681 F.3d at 1054 (citing
5 *Shinseki*, 556 U.S. at 407–09). Although Dr. Thompson indicated Plaintiff would
6 probably need to elevate his leg for 15 minutes about two to three times a day, he also
7 testified that if an employer provided the standard 15-minute breaks every two hours,³
8 that would be sufficient. *See* AR at 127. The ALJ does not need to add limitations to the
9 RFC that would not actually limit employment.

10 The vocational expert's testimony does not require a different result. The
11 vocational expert stated that if Plaintiff needed to elevate his leg for "more than 15
12 minutes at a time," it would be prohibitive to being able to maintain employment. AR at
13 109–10. Dr. Thompson testified at most that Plaintiff would need to elevate his leg for
14 15 minutes at a time, so the vocational expert's testimony does not establish Plaintiff is
15 unable to work.

16 Plaintiff further argues the ALJ erred by failing to accept Dr. Thompson's
17 testimony that he could not oppose an opinion from Dr. Frazier. *See* Pl. Op. Br. at 6.
18 First, Plaintiff overstates Dr. Thompson's testimony. Dr. Thompson did not opine that
19 Dr. Frazier was correct; he testified, "I don't have solid data with which to disagree." AR
20 at 128. Second, as discussed below, Dr. Frazier did not opine as to any limitations; he

21 ³ The parties do not dispute that this is standard among employers. *See* Pl. Op. Br. at 5–
22 6; Def. Resp. Br. (Dkt. # 13) at 9.

1 stated his treatment was consistent with statements from others. *See infra* Part VII.C.
2 The ALJ was not obligated to add any limitations to the RFC based on this testimony.
3 Plaintiff has therefore failed to show the ALJ harmfully erred in evaluating Dr.
4 Thompson's opinions.

5 **C. The ALJ Did Not Harmfully Err in Discounting Dr. Frazier's Opinions**

6 Plaintiff argues the ALJ failed to give specific and legitimate reasons for rejecting
7 Dr. Frazier's opinions. Pl. Op. Br. at 7–9. Dr. Frazier responded to a yes/no
8 questionnaire from Plaintiff's counsel. *See* AR at 923–24. Dr. Frazier agreed with all of
9 counsel's statements, including that another doctor's opinions were "consistent with" his
10 observations and treatment, and that Plaintiff's claim that he needed to elevate his right
11 leg was "consistent with the nature and severity of [Plaintiff's] foot and ankle
12 conditions." AR at 923–24.

13 The ALJ gave Dr. Frazier's opinions limited weight. AR at 48–49. The ALJ
14 reasoned the "format of the statement requires forced choice answers in a letter drafted by
15 the claimant's representative." AR at 49. The ALJ further reasoned Dr. Frazier's
16 opinions were inconsistent with his and others' clinical findings. *Id.*

17 Plaintiff has not identified any specific limitations about which Dr. Frazier opined
18 that were excluded from the RFC, and has thus not shown harmful error. *See Osenbrock*
19 *v. Apfel*, 240 F.3d 1157, 1163–64 (9th Cir. 2001) (noting the ALJ has no obligation to
20 include in the RFC alleged limitations for which the claimant fails to present evidence).
21 Dr. Frazier stated his observations and treatment were not inconsistent with statements
22 and opinions from others, but that is not the same as opining that Plaintiff had specific

1 limitations. Regardless of the validity of the ALJ's reasoning, there were no firm opined
 2 limitations from Dr. Frazier that the ALJ needed to include in the RFC. Plaintiff has thus
 3 failed to show the ALJ harmfully erred in evaluation Dr. Frazier's opinions.

4 **D. The ALJ Did Not Harmfully Err in Assessing Plaintiff's RFC and Performing**
 5 **the Step Five Evaluation**

6 Plaintiff argues the ALJ erred in assessing Plaintiff's RFC because she did not
 7 include all limitations supported by Plaintiff's testimony, Dr. Thompson's opinions, and
 8 Dr. Frazier's opinions. Pl. Op. Br. at 9–10. This argument is derivative of Plaintiff's
 9 other arguments, as it is based on the contention the ALJ failed to properly evaluate the
 10 medical evidence and Plaintiff's symptom testimony. *See id.* Because the Court has
 11 found the ALJ did not err in her assessment of the evidence, Plaintiff's argument fails.
 12 *See Stubbs-Danielson v. Astrue*, 539 F.3d 1169, 1174 (9th Cir. 2008) (holding an ALJ has
 13 no obligation to include limitations in the RFC that are based on properly rejected
 14 opinions and testimony).

15 **VIII. ORDER**

16 Therefore, it is hereby ORDERED that the Commissioner's final decision denying
 17 Plaintiff disability benefits is AFFIRMED and this case is DISMISSED with prejudice.

18 Dated this 6th day of July, 2020.

19 

20

BENJAMIN H. SETTLE
 21 United States District Judge
 22